For receiving Office use only-International Application No. REQUEST International Filing Date The undersigned requests that the present international application be processed Name of receiving Office and "PCT International Application" according to the Patent Cooperation Treaty. Applicant's or agent's file reference (if desired) (12 characters maximum) 702970PCT TITLE OF INVENTION Box No. I Vehicle Window Adjustment Device **APPLICANT** Box No. II This person is also inventor Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) Telephone No. 905-898-2665 INTIER AUTOMOTIVE CLOSURES INC. Facsimile No. 521 Newpark Boulevard 905-898-3206 Newmarket, Ontario L3Y 4X7 Teleprinter No. Canada Applicant's registration No. with the Office State (that is, country) of nationality: State (that is, country) of residence: CA CA all designated all designated States except the United States of America the United States the States indicated in This person is applicant for the purposes of: the Supplemental Box of America only Box No. III FURTHER APPLICANT(S) AND/OR (FURTHER) INVENTOR(S) Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country. The country of the address indicated in this Box is the applicant's State (that is, country) of residence if no State of residence is indicated below.) This person is: applicant only **BUCHTA**, Christoph Klosterbogen 3 applicant and inventor 82061 Neuried Germany inventor only (If this check-box is marked, do not fill in below.) Applicant's registration No. with the Office State (that is, country) of nationality: State (that is, country) of residence: DE DE all designated This person is applicant all designated States except the United States the States indicated in the United States of America of America only for the purposes of: States the Supplemental Box Further applicants and/or (further) inventors are indicated on a continuation sheet. Box No. IV AGENT OR COMMON REPRESENTATIVE; OR ADDRESS FOR CORRESPONDENCE The person identified below is hereby/has been appointed to act on behalf of the applicant(s) before the competent International Authorities as: common agent representative Name and address: (Family name followed by given name; for a legal entity, full official designation. The address must include postal code and name of country.) Telephone No. 905-726-2462 IMAI, Jeffrey T., PORAT, Alex, BRANDT, Kerstin B. MAGNA INTERNATIONAL INC.

Address for correspondence: Mark this check-box where no agent or common representative is/has been appointed and the space above is used instead to indicate a special address to which correspondence should be sent.

Form PCT/RO/101 (first sheet) (January 2004) LegalStar 2004, Form PCTREQ

337 Magna Drive

Aurora, Ontario L4G 7K1

Canada

Agent's registration No. with the Office

Facsimile No.

905-726-7173

Teleprinter No.

Sheet	NI-	2	
MICCI	NO.	 	

Box No.V DESIGNATIONS				
The filing of this request constitutes under Rule 4.9(a), the designation of all Contracting States bound by the PCT on the international filing date, for the grant of every kind of protection available and, where applicable, for the grant of both regional and national patents.				
However,				
l —	designated for any kind of na			
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	on is not designated for any l	•		
effect, under the national	nay be used to exclude (irrev law, of an earlier national a ch national law provisions in	pplication from which pr	iority is claimed. See t	avoid the ceasing of the he Notes to Box No. V as
Box No. VI PRIORITY	CLAIM			
The priority of the follow	ing earlier application(s) is h	ereby claimed:		
Filing date	Number	Where earlier application is:		
of earler application (day/month/year)	of earlier application	national application: country or Member	regional application:* regional Office	international application: receiving Office
item (1) 15 September 2003 (15/09/03)	60/502,989	US		
item (2)			·	
item (3)				
Further priority clain	as are indicated in the Supple	mental Box.		
The receiving Office is requested to prepare and transmit to the International Bureau a certified copy of the earlier application(s) (only if the earlier application was filed with the Office which for the purposes of this international application is the receiving Office) identified above as:				
all items i	tem (1) item (2	item (3)	other, se	ee Supplemental Box
* Where the earlier application is an ARIPO application, indicate at least one country party to the Paris Convention for the Protection of Industrial Property or one Member of the World Trade Organization for which that earlier application was filed (Rule 4.10(b)(ii)):				

Box No. VII INTERN	ATIONAL SEARCHING	AUTHORITY		
Choice of International Searching Authority (ISA) (if two or more International Searching Authorities are competent to carry out the international search, indicate the Authority chosen; the two-letter code may be used):				
ISA/	• • • • • • • • • • • • • • • • • • • •			
Request to use results of from the International Sec	earlier search; reference to	that search (if an earlie	er search has been car	ried out by or requested
Date (day/month/year)	Numi	ber Cour	ntry (or regional Office)
Box No. VIII DECLARATIONS				
The following declarations are contained in Boxes Nos. VIII (i) to (v) (mark the applicable check-boxes below and indicate in the right column the number of each type of declaration): Number of declarations				
Box No. VIII (i) Declaration as to the identity of the inventor				
Box No. VIII (ii) Declaration as to the applicant's entitlement, as at the international filing date, to apply for and be granted a patent .				
Box No. VIII (iii) Declaration as to the applicant's entitlement, as at the international filing date, to claim the priority of the earlier application			:	
Box No. VIII (iv) Declaration of inventorship (only for the purposes of the designation of the United States of America)				
Box No. VIII (v) Declaration as to non-prejudicial disclosures or exceptions to lack of novelty:				

Box No. IX CHECK LIST; LANGUAGE OF FILING				
This international application contains: (a) in paper form, the following number of sheets: request (including declaration sheets) : 3 description (excluding sequence listing and/or tables related thereto) : 7 claims : 1 abstract : 1 drawings : 3 Sub-total number of sheets 15 sequence listing : tables related thereto : (for both, actual number of sheets if filed in paper form, whether or not also filed in computer readable form; see (c) Total number of sheets : 15 (b) only in computer readable form (Section 801(a)(i)) (i) sequence listing (ii) tables related thereto (c) also in computer readable form (Section 801(a)(iii)) (i) sequence listing (ii) tables related thereto Type and number of carriers (diskette, CD-ROM, CD-R or other) on which are contained the sequence listing: tables related thereto: (additional copies to be indicated under items 9(ii) and/or 10(ii), in right column)	This international application is accompanied by the follow item(s) (mark the applicable check-boxes below and indicate right column the number of each item): 1.	earch under al application): left column) copy for the copy of the copy of the column international		
Figure of the drawings which should accompany the abstract:	Language of filing of the international application: English			
Box No. X SIGNATURE OF APPLICANT, A	AGENT OR COMMON REPRESENTATIVE	from reading the request).		
Next to each signature, indicate the name of the person signing and the capacity in which the person signs (if such capacity is not obvious from reading the request). Alex Porat				
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Date of actual receipt of the purported international application:	international application:			
3. Corrected date of actual receipt due to later but timely received papers or drawings completing the purported international application:				
Date of timely receipt of the required corrections under PCT Article 11(2):		not received:		
5. International Searching Authority (if two or more are competent): ISA/	6. Transmittal of search copy delayed until search fee is paid			
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Date of receipt of the record copy by the International Bureau:				

This sheet is not part of and does not count as a sheet of the international application.

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FEE CALCULATION SHEET Annex to the Request	International Application No.			
Applicant's or agent's file reference 702970PCT	Date stamp of the receiving Office			
Applicant				
Intier Automotive Closures Inc. et al.				
CALCULATION OF PRESCRIBED FEES				
1. TRANSMITTAL FEE	300.00 T			
2. SEARCH FEE International search to be carried out by (If two or more International Searching Authorities are competent to carry out the international search, indicate the name of the Authority which is chosen to carry out the international search.)				
3. INTERNATIONAL FILING FEE				
Where item (b) and/or (c) of Box No. IX apply, enter Sub-total number of sheets Where item (b) and (c) of Box No. IX do not apply, enter Total number of sheets				
il first 30 sheets 1,489.00 ii				
number of sheets in excess of 30 x 16.00 =	0.00[12]			
additional component (only if sequence listing and/or tables related thereto are filed in computer readable form under Section 801(a)(i), or both in that form and on paper, under Section 801(a)(ii)):				
400 x = [
Add amounts entered at i1, i2 and i3 and enter total at I 1,489.00 I				
(Applicants from certain States are entitled to a reduction of 75% of the international filing fee. Where the applicant is (or all applicants are) so entitled,				
4. FEE FOR PRIORITY DOCUMENT (if applicable)				
5. TOTAL FEES PAYABLE	AL box			
MODE OF PAYMENT				
authorization to charge postal money order	cash coupons			
deposit account (see below)	revenue stamps other (specify):			
AUTHORIZATION TO CHARGE (OR CREDIT) DEPOSIT ACCOUNT (This mode of payment may not be available at all receiving Offices) Receiving Office:				
Authorization to charge the total fees indicated above.	Deposit Account No.:			
(This check-box may be marked only if the conditions for depose accounts of the receiving Office so permit) Authorization to che deficiency or credit any overpayment in the total fees indicated	it Date:			
Authorization to charge the fee for priority document.	above. Signature:			
	Signature			